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ABSTRACT

This publication is designed to prepare teachers to discuss Acquired Immune Deficiency Syndrome (AIDS) and related topics with their students. It contains information regarding the background of AIDS and its history, suggested teaching strategies, and resources on which to draw and facilitate learning experiences. It is pointed out that AIDS education, to be effective, must be integrated into more comprehensive areas of study such as health, and should be taught in correlation with various areas of study. The guide provides outlines of programs designed for grades K-3, 4-6, 7-9, and 10-12. Each section describes the characteristics of the students, the content of the education program, competencies, key skills and teaching strategies, and further educational resources. (JD)

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ED325462

AIDS EDUCATION
RESOURCE GUIDE

MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION

Robert E. Bartman, Commissioner of Education
February 1990

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INTRODUCTION

AIDS: What is it? Who gets it? Why teach about it? These, and many other questions are important issues surrounding the AIDS controversy. Simply put, AIDS is a disease that can affect any one of us, either directly or indirectly, and the only means we have, at this point in time, to control the spread of this deadly disease is to talk about it. EDUCATION is the ONLY sure method we have of preventing the spread of AIDS.

This publication is designed for use by all teachers in discussing this topic with their students. It is as important for kindergarten teachers as it is for high school teachers. Children and youth at all age levels need to become aware that their decisions regarding behavior and actions can and probably will affect their health in the future. For the young children, we need to encourage healthy lifestyles and make them aware that there are diseases such as AIDS that can endanger them. Junior high school and senior high school students need to understand that the behaviors they may choose to engage in may have long-term effects on their health and possibly their lives.

The Missouri Department of Elementary and Secondary Education believes that AIDS education should not be isolated into a unit that has no connection with other areas of studies or relevance to the students' lives. AIDS education, to be effective, must be integrated into more comprehensive areas of study such as health, and should be taught in correlation with various areas of study. AIDS education, for example needs to be a part of discussions on disease prevention and control, family life/sex education, community health, drug and alcohol abuse and could even be incorporated into science and social studies. The facts and statistics speak for themselves. AIDS is an issue from which we cannot hide. Education is the key to stopping this deadly disease.

Within this resource guide, you will find information regarding the background of AIDS and its history; AIDS-specific key skills from the Missouri Comprehensive Health Competencies and Key Skills; suggested teaching strategies, and resources on which to draw to assist and facilitate learning experiences. Discussions on AIDS topics with junior high school and senior high school students may lead to frank and explicit conversations and questions. These young people are at an age where they may have experimented with drugs and sex and may be participating in these activities on a regular basis. They are not only in need of this information but are ready to discuss these topics.

This publication is designed to prepare teachers to discuss AIDS and related topics, but it is not intended to take precedence over local standards or community feelings. We recommend that each community determine the amount of detail and level of explicitness to be reached during instruction on AIDS related topics. We encourage local schools and districts to obtain input and support from their communities and community leaders. Parents, local clergy and medical professionals should be involved in this decision making process.

When dealing with a relatively new subject such as AIDS, it is important to present current and updated material. While every effort has been made to ensure the information in this guide is current, the advances

in research may cause some of the information to become outdated. We have prepared the format of this guide to allow for replacement of such information and to allow for expansion of the guide. We plan to periodically provide new and expanded material for the guide and thus have prepared it in a loose-leaf format. These new pages will be mailed to you as they become available.

The information in this Resource Guide is intended for use by teachers, not students. Some of the information may be too explicit for use at some grade levels or in some schools and not explicit enough for other grades or in other schools. Teachers should carefully review the suggested resource materials before using them in classrooms to be sure the content is compatible for locally established guidelines.

BACKGROUND INFORMATION FOR TEACHERS

WHAT IS AIDS?

AIDS stands for acquired immunodeficiency syndrome. It is a disease caused by the human immunodeficiency virus (HIV), hereafter simply referred to as the AIDS virus. The AIDS virus may live in the human body for years and can be spread to others before any symptoms appear. It primarily affects a person by making the body unable to fight disease and infections. These diseases and infections can kill.

It is important to understand that people infected with the AIDS virus usually look and feel healthy, and may not even know for many years that they are infected. When symptoms do appear, they can be like those of many common illnesses, such as swollen glands, coughing, fever, or diarrhea. These symptoms vary from person to person. Only a doctor and a blood test can tell if someone is infected with the AIDS virus.

AIDS cannot be cured. Scientists expect that, if it is even possible, finding a vaccine or cure will take many more years of research.

Scientists estimate that 1.0 to 1.5 million people in the United States are currently infected with the AIDS virus. Most of these people appear healthy today.

HOW THE AIDS VIRUS IS SPREAD

Here are the most common ways the AIDS virus is spread:

Unprotected sex (vaginal or anal intercourse and oral sex without a condom and spermicide) with someone who is infected with the AIDS virus;

Sharing hypodermic needles or syringes (usually while injecting drugs) with someone who is infected with the AIDS virus; and

From an infected mother to baby during pregnancy or childbirth and possibly by breast feeding.

Before 1985, people became infected with the AIDS virus through receiving infected blood and certain blood products (used for transfusion and to treat diseases like homophilia). The chance of becoming infected with the AIDS virus through transfusion in the United States is now extremely low. Donated blood and plasma have been tested for antibodies to the AIDS virus since the spring of 1985. In addition, those who want to give blood have been screened out (not allowed to give blood) if they indicate that they are at risk of being infected with certain germs, including the AIDS virus.

If antibodies to the AIDS virus are found in donated blood, the blood is destroyed. The test cannot, however, completely eliminate all infected blood. It is possible for people to donate blood or plasma shortly after becoming infected unknowingly with the AIDS virus, or before their blood has produced antibodies that can be found by current blood tests. Although the current blood tests are very accurate, more specific and accurate tests are being developed to make blood and plasma products even safer.

HOW THE AIDS VIRUS IS NOT SPREAD

There are many common misunderstandings about how the AIDS virus may be transmitted, all of them causing unnecesssary fear and confusion. Below is a list of ways that AIDS is NOT spread, contrary to public opinion:

--AIDS is not transmitted by donating blood or by having a blood test.

--AIDS is not transmitted by mosquitoes or other insects.

--AIDS is not transmitted by shaking or holding hands, hugging, or touching another person.

--AIDS is not transmitted by eating food prepared by a person with AIDS or eating in a restaurant with persons with AIDS.

--AIDS is not transmitted by playing sports or games with persons with AIDS, nor is it transmitted by using public showers, bathrooms or swimming pools.

--AIDS is not transmitted by any type of casual contact. Not one person has ever become infected by simply being around a person with AIDS. The methods of transmission of the AIDS virus are very limited and very specific.

AIDS HISTORY

1959 A blood sample is taken and stored in Kinshasa, Zaire. Twenty-seven years later, researchers find evidence of the human immunodeficiency virus (HIV), the AIDS-causing virus, in the sample. It is the oldest known blood sample to show evidence of the virus.

1976 A woman dies of an unknown ailment in San Francisco. Later tests reveal the presence of AIDS antibodies (produced by the body in response to HIV exposure) in her blood.

1978 A child with a severely impaired immune system dies in New York. For some reason, the natural defenses in the young girl's blood had failed. The doctors are baffled. The child is later identified as the first person known to have died from AIDS in the U.S.

1979 Doctors in New York, San Francisco, and Los Angeles are bewildered by cases of rare diseases in young men whose immune systems have mysteriously broken down. Diseases include Pneumocystic carinii pneumonia (PCP) and a rare cancer called Kaposi's sarcoma (KS).

1980 Doctors in New York, San Francisco, and Los Angeles note a common factor in deadly PCP and KS cases among young, otherwise healthy men. All the patients are homosexual. This leads doctors to suggest that whatever is causing the men's immune systems to collapse is sexually transmitted.

1981 The U.S. Centers for Disease Control (CDC) in Atlanta receives reports of more than 100 deaths attributed to a collapse of patients' immune systems.

Incidents of PCP and KS among intravenous (IV) drug abusers are reported to the CDC.

Total AIDS cases in U.S. to date: 342. Death toll 241.

1982 In Uganda hundreds of people are reported to be dying of a disease villagers call "slim." Researchers identify the disease as a variety of infections resulting from the failure of patients' immune systems. Unlike similar cases in the U.S., in Africa both women and men are affected by the condition.

First case of AIDS in Missouri is reported.

September: The CDC names the "system disease" Acquired Immune Deficiency Syndrome (AIDS).

December: The CDC receives its first reports of AIDS cases among infants.

Total AIDS cases to date: 1,354. Death toll: 1,118.

1983 **May:** A team of scientists at the Pasteur Institute in Paris discover and isolate a virus from an AIDS patient and name it LAV (lymphadenopathy-associated virus) because it attacks defending cells in the body's lymph system.

September: The New York State Division of Human Rights receives its first AIDS-related discrimination case. The complaint was filed by a United Airlines flight attendant who was fired because of "unusual medical symptoms." The airline was later ordered to reinstate the attendant.

Total AIDS cases to date: 4,162. Death toll: 3,548.

1984 **April:** U.S. researchers led by Dr. Robert Gallo report that they have isolated and identified the AIDS-causing virus. They name it HTLV-III (human T-lymphotropic virus type III).

October: National Cancer Institute researchers report that genetic variations of the AIDS-causing virus (slight differences almost from case to case) pose "significant problems for vaccine development."

Total U. S. AIDS cases to date: 9,798. Death toll: 8,073.

1985 **March:** The ELISA (enzyme-linked immunosorbent assay) test is used to detect antibodies in blood resulting from exposure to the AIDS virus. The test is licensed to screen donated blood.

September: A teenage hemophiliac with AIDS attends class at a junior high school in Swansea, Massachusetts, and becomes the first known person with AIDS permitted to attend regular classes in a U.S. public school.

October: The U.S. military begins screening all new recruits and active-duty personnel for exposure to the AIDS virus. Those who test positive are rejected for services.

Total U.S. AIDS cases to date: 19,602. Death toll: 15,171.

1986 **February:** The New York State Supreme Court rules that children with AIDS cannot automatically be excluded from regular classes in New York City public schools. A California court rules against a school district's decision to prohibit an 11-year-old student infected with the AIDS virus from attending regular classes. He returns to school.

May: Research at several labs indicated that LAV and HTLV-III are the same virus. The CDC renames it HIV for human immunodeficiency virus.

September: The Public Health Service announces that the experimental drug azidothymidine (AZT) eased the symptoms of a group of AIDS patients.

October: The World Health Organization reports a sharp increase in the number of AIDS cases worldwide.

November: U.S. Surgeon General C. Everett Koop releases a landmark report predicting 270,000 AIDS cases and 179,000 deaths attributed to AIDS in the U.S. by 1991. He states: "AIDS is preventable. It is the responsibility of every citizen to be informed about AIDS and to exercise the appropriate preventive measures."

December: Scientists in Zaire and France start testing potential AIDS vaccines. They hope to provide a form of immunization for patients who are infected with the AIDS virus but do not have the disease.

Total AIDS cases in U.S. to date: 33,505. Death toll: 21,960.

1987 **January:** The U.S. State Department begins to screen all foreign service applicants for the presence of HIV antibodies.

National Institutes of Health (NIH) scientists develop a potential AIDS vaccine using an inactive part of the virus.

March: The U.S. Food and Drug Administration (FDA) permits the commercial sale of AZT despite incomplete knowledge of the drug's safety and effectiveness.

April: President Ronald Reagan endorses AIDS education in schools.

May: The CDC reports that three health-care workers became infected with AIDS after they were exposed to blood from infected patients.

June: The Third International Conference on AIDS is held in Washington, D.C., with 8,700 participants from 50 countries. The World Health Organization announces that an estimated 100 million people are infected with the AIDS virus worldwide.

The National Cancer Center reports the discovery of another AIDS-causing virus, HIV-2. Some scientists believe this confirms suspicions that the AIDS virus is related to a virus found in the African green monkey.

August: The FDA approves prelimary trials of an AIDS vaccine on human beings.

September: A 13-member advisory commission on AIDS appointed by President Reagan holds its first meeting to hear reports from health officials and others involved in combating AIDS.

October: The CDC declares National AIDS Prevention Month and launches a massive public information campaign about the epidemic.

Total AIDS cases in U.S. to date: 41,825. Death toll: 24,070.

1988 **June:** Final report from the Presidential Commission on the Human Immunodeficiency Virus Epidemic is submitted to the president.

Total AIDS cases in U.S. to date: 79,389. Death toll: 44,590.

1989 Multiple new drugs for treatment begin being used in clinical trials.

June: The International Conference on AIDS meets in Montreal, Quebec. Main topic of presentation centers around the new treatments for HIV infection.

Total AIDS cases in U.S. to date: 97,193. Death toll: 56,468.

Information taken from:

Adaption of Hanneman, Tamara. "The Sudden Spread of the AIDS Epidemic." Scholastic Update, October 16, 1987.

The Science of AIDS: A Scientific American Reader; W. E. Freeman and Company.

Centers for Disease Control and Missouri Department of Health statistics.

GRADES K-3

CHARACTERISTICS OF THE K-3 CHILD

These children need to be provided education about healthy behavior and lifestyle, but caution should be used when dealing with such subjects as AIDS. Children in this age group may be aware of the disease, and may even know someone who has AIDS, but detailed information regarding transmission and effects of the disease is not really appropriate for this group. Since these children have many fears and are prone to jump to false conclusions, they should be reassured that AIDS is not a disease they are likely to get. And, since they are sensitive to the needs of others, teaching them basic, factual information may help them to be more caring and sensitive in the future.

CONTENT FOR EARLY ELEMENTARY CHILDREN

Education about AIDS for students in early elementary grades principally should focus on disease prevention in general and on allaying excessive fears of AIDS and of becoming infected.

AIDS is a disease that is causing some adults to get very sick, but it does not commonly affect children.

AIDS is very hard to get. You cannot get it just by being near or touching someone who has it.

Scientists all over the world are working hard to find a way to stop people from getting AIDS and to cure those who have it.

AIDS-SPECIFIC COMPETENCIES, KEY SKILLS AND TEACHING STRATEGIES

LEVEL I (K-3)

COMPETENCY II

Utilizing the most reliable sources of information available, identify the causes and effects of health problems on the body and recognize those which can be prevented and/or controlled by oneself.

The student will:

1. Describe how infection may occur and modes of transmission (i.e., saliva, food- or water-borne, skin, blood supply, air).

2. Identify ways infection may be prevented (i.e., washing hands, covering nose and mouth when sneezing, staying home when ill).

SUGGESTED TEACHING STRATEGIES

1. Make a chart of illnesses encountered by class members. Have affected member describe how he/she felt, how illness was identified, what treatment occurred and how it might have been acquired.

2. Demonstrate good hygiene by putting a few drops of vegetable oil on the child's hands and sprinkle a little cinnamon on them. Have the child try to remove the cinnamon by just washing with cold water, then by using warm water and soap.

3. Have class "brainstorm" for a list of diseases and/or illnesses, then illustrate, using a chalk line or string between two stick figures, those diseases that could be transmitted from one person to another.

4. Reinforce good health habits by reminding students to wash before eating, cover nose and mouth when sneezing and coughing, properly disposing of tissues, etc.

LITERATURE RESOURCES

Does AIDS Hurt? Educating Young Children About AIDS--Marcia Quackenbush, MS and Sylvia Villarreal, MD.

--Suggestions for teachers, parents and other care providers of children to age 10. Available from Network Publications, P. O. Box 1830, Santa Cruz, CA 95061-1830

GRADES 4-6

CHARACTERISTICS OF THE 4-6 CHILD

These children are at an age where more detailed information is needed to personalize the effects of diseases such as AIDS. Because fear is still a part of life, reassurance needs to be given frequently that AIDS is a disease that is very hard to get. This age is a very good time for dispelling myths and inaccuracies about the disease. Children in this group are inquisitive, and are becoming able to think abstractly. Information regarding choices in behaviors and actions as they relate to the future should be a major part of AIDS education at this age. Since they are inquisitive, questions relating to transmission may come up in discussions. The questions should be answered honestly and briefly. It may be more appropriate to discuss some issues in private.

CONTENT FOR LATE ELEMENTARY/MIDDLE CHILDREN

Education about AIDS for students in late elementary/middle school grades should be designed with consideration for the following information.

Viruses are living organisms too small to be seen by the unaided eye.

Viruses can be transmitted from an infected person to an uninfected person through various means.

Some viruses cause disease among people.

Persons who are infected with some viruses that cause disease may not have any signs or symptoms of disease.

AIDS (an abbreviation for acquired immunodeficiency syndrome) is caused by a virus that weakens the ability of infected individuals to fight off disease.

No one has ever recovered from AIDS.

About 1 to 1.5 million of the total population of approximately 240 million Americans currently are infected with the AIDS virus and consequently are capable of infecting others.

People who are infected with the AIDS virus live in every state in the United States and in most other countries of the world. Infected people live in cities as well as in suburbs, small towns, and rural areas. Although most infected people are adults, teenagers can also become infected. Females as well as males are infected. People of every race are infected, including whites, blacks, Latinos, Native Americans, and Asian/Pacific Islanders.

The AIDS virus can be transmitted by sexual contact with an infected person; by using needles and other injection equipment that an infected person has used; and from an infected mother to her infant before or during birth.

It sometimes takes several years after becoming infected with the AIDS virus before symptoms of the disease appear. Thus, people who are infected with the virus can infect other people--even though the people who transmit the infection do not feel or look sick.

The AIDS virus is not easily caught. It is not caught by being in the same room with an infected person, by touching someone who is infected, by donating blood or ordinary casual contact. The virus is not transmitted by insects or animals or by swimming in swimming pools.

AIDS-SPECIFIC COMPETENCIES, KEY SKILLS AND TEACHING STRATEGIES

LEVEL II (4-6)

COMPETENCY II

Utilizing the most reliable sources of information available, identify the causes and effects of health problems on the body and recognize those which can be prevented and/or controlled by oneself.

The student will:

1. Describe how the body builds immunity and identify conditions which cause the loss or lack of immunity (i.e., congenital conditions, medications, other diseases, HIV infection/AIDS, cancer, leukemia); and state what can be done personally to prevent the loss or lack of immunity.

2. Identify and describe the various ways diseases are transmitted (i.e., air-borne, food-borne, water -borne, direct and indirect contact with body fluid of infected individual).

3. Describe effects of substance abuse on the family (i.e., parent(s), child).

COMPETENCY III

Identify and analyze social health problems for implications and existing or needed prevention, intervention and treatment programs.

The student will:

1. Given an example of a social or health problem related to family life/sex education, list ways to improve the communicative interaction within the situation.

COMPETENCY IV

Recognize, analyze and demonstrate personal health behaviors which will lead to and promote a healthy lifestyle.

The student will:

1. Identify negative health behaviors and describe how they affect the body and contribute to the development of disease (i.e., tobacco use, poor food choices, lack of sleep and exercise, stress, lack of cleanliness, inappropriate use of drugs, sex, alcohol).

2. Describe the detection, prevention and control of common health problems (i.e., alcoholism, cancer, diabetes, heart disease, HIV infection/AIDS, lung disease, measles) and decide what personal decisions are needed to lead to a more healthy lifestyle and the prevention of disease.

3. Recognize some positive attitudes and behaviors that will favorably influence sexual behavior.

4. Define and describe several problems relating to sexuality and peer pressure that can be effectively dealt with by using decisions based on values .

SUGGESTED TEACHING STRATEGIES

1. Study the systems, organs and tissues which are affected by various diseases (including AIDS).

2. Write a story "If I had (disease) my daily activities would be (list activities from 8:00 a.m. to 9:00 p.m.).

3. Investigate how the body develops an immunity by mobilizing antibodies against a specific antigen (immunization by dead or attenuated pathogens, toxins or toxoids, and actual diseases). Make a two way chart listing common communicable diseases and modes of transmission.

4. Discuss specific treatment measures for immune deficient individuals (i.e., reverse isolation, medications, precautions for a child in school with HIV infection/AIDS).

5. List positive and negative health behaviors of self and/or family members and then develop a log which contains their actions for one day and classify these actions as positive or negative.

6. Identify and make a booklet or posters of behaviors which help to interrupt transmission of disease.

7. Research the early warning signs, and other methods of detection and treatment of HIV infection/AIDS, cancer, diabetes, epilepsy, heart disease and other diseases.

VIDEO RESOURCES

Available through the Department of Health lending library.

What is AIDS? Persons in costumes are used in this video to explain the AIDS virus and how it works.

LITERATURE RESOURCES

Learning About AIDS--Alvin and Virginia Silverstein

--A book for children that will help answer questions about AIDS, help understand what causes AIDS, how it is spread and how it affects the the body. Available through Enslow Publishers, Box 777, Hillside, N.J. 07205.

Friends for Life--Barbara Aiello and Jeffrey Shulman

--A provocative and moving story of one child's search for understanding and courage in the face of prejudice and fear. Available from Twenty First Century Books, 38 South Market Street, Frederick, MD 21701.

GRADES 7-9

CHARACTERISTICS OF THE 7-9 STUDENT

These students represent various attitudes and emotions. They may be very adult-like at times and then without warning become childlike. Students in this age group may be engaged in sexual activity and/or drug use. It is important that information about transmission of diseases such as AIDS be presented in a straightforward, honest manner. These young people need to know the facts and need to understand that their choices will influence the rest of their lives. They are capable of exercising reason and judgment and should be challenged with learning experiences which will help them continue (or change to) healthy behavioral choices. Because this group is insecure, encouragement for healthy choices should be given at any opportunity.

CONTENT FOR JUNIOR HIGH YOUTH

Education about AIDS for students in junior high school grades should be developed and presented taking into consideration the following information.

The virus that causes AIDS, and other health problems, is called Human Immunodeficiency Virus, or HIV.

The risk of becoming infected with the AIDS virus can be virtually eliminated by not engaging in sexual activities and by not using illegal intravenous drugs.

Sexual transmission of the AIDS virus is not a threat to those uninfected individuals who engage in mutually monogamous sexual relations.

The AIDS virus may be transmitted in any of the following ways: a) by sexual contact with an infected person; b) by using needles or other injection equipment that an infected person has used; and c) from an infected mother to her infant before or during birth.

The following people are at increased risk of being infected with the AIDS virus, and consequently being infectious: a) people who have injected illegal drugs; b) people who have had multiple sexual partners, male or female; c) people who received blood transfusions or blood products prior to 1985; and d) infants born to infected mothers.

The risk of becoming infected is increased by having a sexual partner who is at increased risk of having contracted the AIDS virus (as identified previously), practicing sexual behavior that results in the exchange of body fluids (i.e., semen, vaginal secretions, blood), and using unsterile needles or paraphernalia to inject drugs.

Although no transmission from deep, open-mouth (i.e. French) kissing has been documented, such kissing theoretically could transmit the AIDS virus from an infected to an uninfected person through direct exposure of mucous membranes to infected blood or saliva.

In the past, medical use of blood, such as transfusing blood and treating hemophiliacs with blood clotting products, has caused some people to become infected with the AIDS virus. However, since 1985 all donated blood has been tested to determine whether it is infected with the AIDS virus; moreover, all blood clotting products have been made from screened plasma and have been heated to destroy any AIDS virus that might remain in the concentrate. Thus, the risk of becoming infected with the AIDS virus from blood transfusions and from blood clotting products is extremely low. The test cannot, however, completely eliminate all infected blood. It is possible for people to donate blood or plasma shortly after becoming infected unknowingly with the AIDS virus, or before their blood has produced antibodies that can be found by current blood tests. Although the current blood tests are highly accurate, more specific tests are being developed to make blood and plasma products even safer.

Abstinence from sexual intercourse outside of marriage and abstinence from the use of illegal, injectable drugs are the only absolute methods of avoiding infection from the AIDS virus.

Behavior that prevents exposure to the AIDS virus also may prevent unintended pregnancies and exposure to the organisms that cause Chlamydia infection, gonorrhea, herpes, human papillomavirus, and syphillis.

Persons who believe they may be infected with the AIDS virus should take precautions not to infect others and to seek counseling and antibody testing to determine whether they are infected. If persons are not infected, counseling and testing can relieve unnecessary anxiety and reinforce the need to adopt or continue practices that reduce the risk of infection. If persons are infected, they should: a) take precautions to protect sexual partners from becoming infected; b) advise previous and current partners or drug-abuse partners to receive counseling and testing; c) take precautions against becoming pregnant; and d) seek medical care and counseling about other medical problems that may result from a weakened immunologic system.

AIDS-SPECIFIC COMPETENCIES, KEY SKILLS AND TEACHING STRATEGIES

LEVEL III (7-9)

COMPETENCY I

Through experience, observation and reading, identify the issues, needs and/or problems facing individuals and society.

The student will:

1. Identify the need to be knowledgeable about and describe the body's natural defenses against disease (i.e., skin, mucous membranes, lymphatic system, white blood cells).

2. Investigate the extent of disability and death caused by major diseases (i.e., cardiovascular disease, cancer, respiratory diseases, AIDS).

3. Identify problems and potential outcomes of teenage sexual activity (i.e., pregnancy, sexually transmitted diseases and emotional problems.)

4. Recognize the importance of changing an individual's behavior, not merely learning technical facts and materials.

COMPETENCY II

Identify and analyze social health problems for implications and existing or needed prevention, intervention and treatment programs.

The student will:

1. Identify and describe the infectious agents that cause the major sexually transmitted diseases (i.e., HIV infection/AIDS, syphilis, gonorrhea, Chlamydia, herpes, venereal warts).

2. Identify and analyze personal behaviors and activities which may put individuals at risk of disease and determine specific behaviors which will prevent disease.

3. Identify sexual behaviors which prevent or reduce the risk of pregnancy and sexually transmitted diseases (abstinence, mutually monogamous relationship).

COMPETENCY III

Identify and analyze social health problems for implications and exisiting or needed prevention, intervention and treatment programs.

The student will:

1. Differentiate between diseases which have been controlled and/or eradicated and those which are not being controlled and explain why.

2. Describe and analyze community efforts to control HIV infection/AIDS, typhoid, hepatitis A, Giardia, salmonella and other diseases.

COMPETENCY IV

Recognize, analyze and demonstrate personal health behaviors which will lead to and promote a healthy lifestyle.

The student will:

1. Evaluate personal health practices and identify those which will contribute to disease prevention and those which present a health risk.

2. Distinguish between behaviors which do or do not reduce the risk of acquiring HIV infection/AIDS and other sexually transmitted diseases (i.e., abstinence, mutually monogamous relationship, and avoiding the sharing of body fluids during sexual relations).

3. Develop realistic alternatives for undesirable health habits related to the control and prevention of disease.

4. Recognize and learn various peer pressure "lines" (statements) and selected appropriate refusal skills, (i.e., say no, explain reasons, change subject, leave, assertive behavior, refuse to discuss, make a joke).

SUGGESTED TEACHING STRATEGIES

1. Assign students to contact the nurse or local health official to secure the latest statistics on communicable disease and make a report to the class.

2. Contact voluntary and official health organizations for information on chronic disease mortality and make a report on the topic of chronic diseases, including HIV infection/AIDS.

3. Use transparencies and videotapes to demonstrate ways in which the AIDS virus is transmitted.

4. Have each student prepare a list of the ways that they think the AIDS virus may be transmitted. Place findings on the chalkboard and discuss the misconceptions.

5. Discuss methods of contracting sexually transmitted diseases, the early symptoms and long term consequences of these diseases if not treated.

6. Investigate the illnesses which occur as a result of HIV infection/AIDS: wasting syndrome, Pneumocystic carinii pneumonitis (PCP), Kaposi's Sarcoma (KS), opportunistic infections, and other malignancies.

7. Discuss sexually transmitted disease control measures and compare state and national incidence of sexually transmitted diseases with other reportable diseases.

8. Have students contact state or local officials to discover educational and prevention programs geared at reducing the spread of AIDS and other sexually transmitted diseases.

9. Have students list and discuss methods of prevention of HIV infection/AIDS and other sexually transmitted diseases including abstinence as a first course of prevention.

10. Do a self appraisal of personal risk factors. Forms can be turned in without names and a class total or average developed.

11. Discuss reasons adolescents are at risk for sexually transmitted diseases (i.e., period of experimentation, peer pressure to use illegal substances and engage in sexual activity and high adolescent pregnancy rate all increase the exposure to HIV infection/AIDS and other sexually transmitted diseases).

12. Have a panel discussion on the advantages of abstaining from premarital sex and drug use.

VIDEO RESOURCES

(Available through the Department of Health lending library.)

A is for AIDS This partially animated video explains AIDS, how the disease is spread, and how it affects the body.

AIDS: Taking Action This video explains the AIDS virus, its transmissions and myths. Junior high school students present what teens can do to prevent AIDS and help those who have the virus.

AIDS: What Every Kid Should Know Teenagers discuss the facts and myths of how AIDS is spread and what they can do to prevent contracting the disease.

AIDS: What Everyone Needs to Know This animated film explains in simple terms how the immune system works and how the AIDS virus destroys the body's ability to fight off disease.

LITERATURE RESOURCES

The AIDS Booklet--Frank D. Cox

--A 30 page booklet that provides young people with a good understanding of AIDS and a basis for making decisions about their own behavior. Available through William C. Brown Publishers, 2460 Kerper Blvd., Debuque, IA 52001

Risky Business

--A comic book format with two stories relevant to the education of teenagers about AIDS and prevention of risky behaviors. Available through the San Francisco AIDS Foundation, Materials Department, 333 Valencia, 4th Floor, P. O. Box 6182, San Francisco, CA 94101-6182

Saturday Night Special--Ana Consuelo Matiella

--A photonovel presenting a story of choices. It deals explicitly with condom usage and IV drug use. It provides the reader with information to use in making choices about sex and drugs. Available from Network Publications, P. O. Box 1830, Santa Cruz, CA 95061-1830

AIDS--Malcolm Ater

--A comic book with factual information presented in a clear and concise manner. It was edited by top health authorities. Available from Commerical Comics, Inc., 1500 Massachusetts Avenue, N.W., Washington, D.C. 20005

SPEAKERS BUREAUS

The following agencies will provide, at no cost, a speaker for any group desiring more information about AIDS. Each agency brings its own perspective on the subject. For example, the Teen's TAP Program from the Good Samaritan Project in Kansas City will send a high school -aged speaker to speak with other teens.

Missouri Department of Health, Bureau of AIDS Prevention, Statewide Speakers Bureau. Contact Karen Kliethermes at 314--751-6438.

Metropolitan St. Louis AIDS Program. Contact Mario Barbel at 314--658-1159.

St. Louis Effort for AIDS. Contact Elizabeth Price at 314--531-2847.

American Red Cross--St. Louis Region. Contact Chris Edwards at 314--658-5850.

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Good Samaritan Project--Teen's TAP, in the Kansas City area. Contact Cara Morris at 816--561-8784.

Kansas University AIDS Education Project--Health professions students in the KU School of Medicine. Contact the project participants at 913--588-5235.

GRADES 10-12

CHARACTERISTICS OF THE 10-12 YOUNG ADULT

This group is more stable than younger students. They are able to handle complex, sensitive and mature information, and want to be treated as adults. Since they may be practicing behaviors that put them at great risk for transmission of diseases such as AIDS, they need to be told the truth regarding transmission and prevention and to be informed of behaviors they should change or avoid. The information should be presented honestly and openly. They should be challenged and encouraged to think about situations where risky behaviors may be present and plan their response to such situations.

CONTENT FOR SENIOR HIGH STUDENTS

Education about AIDS for students in senior high school grades should be developed and presented taking into consideration the following information.

The virus that causes AIDS, and other health problems, is called Human Immunodeficiency Virus, or HIV.

The risk of becoming infected with the AIDS virus can be virtually eliminated by not engaging in sexual activities and by not using illegal intravenous drugs.

Sexual transmission of the AIDS virus is not a threat to those uninfected individuals who engage in mutually monogamous sexual relations.

The AIDS virus may be transmitted in any of the following ways: a) by sexual contact with an infected person (penis/vagina, penis/rectum, mouth/vagina, mouth/penis, mouth/rectum); b) by using needles or other injection equipment that an infected person has used; and c) from an infected mother to her infant before or during birth.

The following people are at increased risk of being infected with the AIDS virus, and consequently being infectious: a) people who have injected illegal drugs; b) people who have had multiple sexual partners, male or female, c) people who received blood transfusions or blood products prior to 1985; and d) infants born to infected mothers.

The risk of becoming infected is increased by having a sexual partner who is at increased risk of having contracted the AIDS virus (as identified previously), practicing sexual behavior that results in the exchange of body fluids (i.e., semen, vaginal secretions, blood), and using unsterile needles or paraphernalia to inject drugs.

Although no transmission from deep, open-mouth (i.e. French) kissing has been documented, such kissing theoretically could transmit the AIDS virus from an infected to an uninfected person through direct exposure of mucous membranes to infected blood or saliva.

In the past, medical use of blood, such as transfusing blood and treating hemophiliacs with blood clotting products, has caused some people to become infected with the AIDS virus. However, since 1985 all donated blood has been tested to determine whether it is infected with the AIDS virus; moreover, all blood clotting products have been made from screened plasma and have been heated to destroy any AIDS virus that might remain in the concentrate. Thus, the risk of becoming infected with the AIDS virus from blood transfusions and from blood clotting products is extremely low. The test cannot, however, completely eliminate all infected blood. It is possible for people to donate blood or plasma shortly after becoming infected unknowingly with the AIDS virus, or before their blood has produced antibodies that can be found by current blood tests. Although the current blood tests are highly accurate, more specific tests are being developed to make blood and plasma products even safer.

Abstinence from sexual intercourse outside of marriage and abstinence from the use of illegal, injectable drugs are the only absolute methods of avoiding infection from the AIDS virus.

Behavior that prevents exposure to the AIDS virus also may prevent unintended pregnancies and exposure to the organisms that cause Chlamydia infection, gonorrhea, herpes, human papillomavirus, and syphilis.

Persons who believe they may be infected with the AIDS virus should take precautions not to infect others and to seek counseling and antibody testing to determine whether they are infected. If persons are not infected, counseling and testing can relieve unnecessary anxiety and reinforce the need to adopt or continue practices that reduce the risk of infection. If persons are infected, they should: a) take precautions to protect sexual partners from becoming infected; b) advise previous and current sexual or drug-abuse partners to receive counseling and testing; c) take precautions against becoming pregnant; and d) seek medical care and counseling about other medical problems that may result from a weakened immunologic system.

AIDS-SPECIFIC COMPETENCIES, KEY SKILLS AND TECHING STRATEGIES

LEVEL IV (10-12)

COMPETENCY I

Through experience, observation and reading, identify the issues, needs and/or problems facing individuals and society.

The student will:

1. Identify the current extent and implications of the following health problems: HIV infection/AIDS, sexually transmitted diseases, dental disease, cardiovascular disease, obesity, lack of fitness and lung disease.

2. Identify several social issues which must be addressed as a result of HIV infection/AIDS (i.e., identification, acceptance, treatment, economic and legal aspects).

COMPETENCY II

Utilizing the most reliable sources of information available, identify the causes and effects of health problems on the body and recognize those which can be prevented and/or controlled by oneself.

The student will:

1. Identify and describe methods of transmission, symptoms and treatment of at least four sexually transmitted diseases (i.e., HIV infection/AIDS, gonorrhea, herpes, Chlamydia, syphilis, venereal warts).

2. Identify the complications of at least four untreated sexually transmitted diseases and what one can do to prevent them.

3. Identify and analyze personal health behavior necessary to prevent and/or control disease within oneself.

4. Recognize that specific diseases including AIDS may be transmitted by intravenous drug users through shared needles.

COMPETENCY III

Identify and analyze health problems for implications and existing or needed prevention, intervention and treatment programs.

The student will:

1. Identify the nearest resources for information, testing, counseling and treatment of communicable and chronic diseases, including HIV infection/AIDS.

2. Identify and describe current and historical efforts to cope with disease epidemics (i.e., bubonic plague, Legionaires disease, poliomyelitis, HIV infection/AIDS, syphilis) and identify what is being done to deal with the major unconquered diseases.

COMPETENCY IV

Recognize, analyze and demonstrate personal health behaviors which will lead to and promote a healthy lifestyle.

The student will:

1. Predict results of high-risk behaviors and the ability of individuals to prevent and control disease.

2. Identify specific personal behaviors that prevent the spread of sexually transmitted diseases (i.e., abstinence, mutually monogamous relationships, elimination of the exchange of body fluids in sexual relations).

3. Identify the specific personal family life and sexual behaviors that will and will not lead to a responsible and healthy lifestyle.

SUGGESTED TEACHING STRATEGIES

1. Make a chart with names of diseases, causative agents, modes of transmission and prevention measures.

2. Develop simulation activities such as role playing a school board meeting in which a student or teacher has been reported to have HIV infection/AIDS and the players discuss policy and procedures for handling body fluids, a person's bill of rights, medical involvement, etc. Utilize free films and literature available from the Missouri Department of Health Free Film and Literature Unit.

3. Students rank diseases in order of "seriousness" in the community, state, nation and world; taking into account factors such as death, disability, economic loss, productivity and total burden on society. Have students discuss and support their ranking.

4. Secure a local health department official to visit the class to discuss sexually transmitted diseases, services, infection rates and problems.

5. Investigate the ramifications of a person infected with a sexually transmitted disease who refuses treatment and/or does not change sexual behaviors.

6. Determine which diseases must be reported and why. Then have students prepare reports and presentations on what they think are educational needs relating to communicable disease control. The teacher should contact the school nurse and health agencies to secure the latest information.

7. Assign students to research and report to the class on the history and prevalence of AIDS in the United States.

8. Lead a discussion on how one person can create an AIDS epidemic.

9. Discuss why HIV infection/AIDS is not transmitted to family members and others with casual contact. Discuss high risk behaviors and possible control measures to prevent the spread of HIV infections/AIDS.

VIDEO RESOURCES

(Available through the Department of Health lending library)

AIDS: A Practical Approach to Prevention This video presents AIDS as a medical issue, a disease not of morals but of the immune system. Topics covered are condom usage and sexual practices.

AIDS: Everything you Should Know This film is hosted by Whoopi Goldberg. She explains that young people need to know how to protect themselves against AIDS. She suggests practicing abstinence or having a mutually monogamous relationship as protection against the disease.

AIDS: Taking Action This video explains the AIDS virus, its transmissions and myths. Students present what teens can do to prevent AIDS and help those who have the virus.

Beyond Fear This video gives a basic overview of the virology aspects, transmission and research information of AIDS. How persons are affected and infected is discussed.

Don't Forget Sherrie Provides urban youth with information on reducing the risk of AIDS. The video is interspersed with factual narrative by actor Michael Warren and Surgeon General Koop.

Letter From Brian A young girl discovers a boy she dated has been diagnosed with AIDS. The film is aimed at giving teenagers information on how to make responsible decisions about postponing sexual involvement for their health and well being.

Sex, Drugs, and AIDS The fact that AIDS is a sexually transmitted disease that can also be spread through contaminated needle usage among IV drug users is addressed. It also explains that avoiding AIDS involves responsibility about sexual involvement.

Understanding AIDS: What Teens Need to Know Designed to address specific teenage concerns and needs. Teens ask the questions in the program about AIDS. Experts in AIDS research and adolescent behavior respond stressing two themes: teens need to learn how to live with the AIDS epidemic; teens can prevent AIDS transmission through behavior.

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QUESTIONS AND ANSWERS

1. WHAT IS AIDS?

Acquired Immunodeficiency Syndrome (AIDS) is a condition characterized by the collapse of the body's natural immunity against disease. Infections that don't threaten people with normal immune systems attack a person with AIDS. It is these "opportunistic infections" that cause death.

2. WHAT CAUSES AIDS?

AIDS is caused by a virus, called the Human Immunodeficiency Virus, or HIV. It is often referred to as the AIDS virus. Different groups of researchers have given it different names: Human T-lymphotropic Virus, type III (HTLV-III); Lymphadenopathy-associated Virus (LAV); or AIDS related virus (ARV). The most current and recommended name is Human Immunodeficiency Virus or HIV.

3. WHERE DID AIDS BEGIN?

No one is sure where the virus actually began. Some scientists thought that the virus may have developed from a virus found in the African green monkey. Other scientists think the virus may have existed in human beings, but in a harmless form. At this time, there is no definite agreement about the origin of AIDS.

4. DO SCIENTISTS REALLY KNOW MUCH ABOUT AIDS?

Yes, scientists know what causes AIDS and how it is passed from person to person. They have developed tests to detect evidence of the virus. Research continues, though, to find a vaccine and cure for AIDS infection.

5. HOW DO PEOPLE BECOME INFECTED WITH THE AIDS VIRUS?

The AIDS virus is passed from one person to another in only a few, very specific ways: unprotected sexual contact which allows for the exchange of body fluids such as semen or vaginal secretions to come into contact with blood and/or mucous membranes; sharing needles or syringes (works) to inject drugs; receiving infected blood, blood products or organs; and transmission from an infected mother to infant during pregnancy. These are the only methods of becoming infected.

6. WHO IS AT RISK FOR AIDS?

Except for those individuals who received blood transfusions or blood products prior to 1985 and infants born to infected mothers, each of us make the decision of whether we will be at risk or not. The AIDS virus is very difficult to catch. You must engage in very specific, risky behaviors to become infected. Avoidance of these behaviors means avoiding contact with the virus. Not engaging in sexual intercourse outside of marriage and not using illegal injectable drugs will keep you from being at risk for AIDS.

7. HOW CAN I REDUCE MY RISK OF BECOMING INFECTED WITH THE AIDS VIRUS?

Don't have unprotected sex with anyone except a mutually faithful, long-term partner and don't inject illegal drugs.

8. CAN YOU GET AIDS FROM HETEROSEXUAL SEX?

Yes, the AIDS virus can be found in semen and vaginal secretions and can be passed through intimate sexual contact, including penis to vagina, penis to rectum, mouth to rectum, mouth to vagina and mouth to penis.

9. HOW DOES THE USE OF A CONDOM AND SPERMICIDES DURING SEX REDUCE THE RISK OF AIDS?

Proper use of condoms during sex, from start to finish, minimizes direct contact with bodily fluids, such as blood, semen and vaginal secretions. Both the semen and vaginal fluid of infected people carry the AIDS virus. A common spermicide, non-oxynol-9, has been known to kill the AIDS virus in laboratory tests.

10. HOW IS DRUG AND ALCOHOL ABUSE LINKED WITH AIDS?

People who use illegal intravenous drugs sometimes share needles and syringes. Infected blood left in a needle or syringe can infect someone else who uses it. Using alcohol and illegal drugs also can affect a person's judgment and lead to risky behavior.

11. CAN A CHILD WITH AIDS PASS IT ON TO ANOTHER CHILD AT SCHOOL?

AIDS is not spread by the kind of casual contact that children have with each other at school such as hugging, touching, eating together, and sharing bathrooms.

12. CAN YOU GET AIDS FROM BEING WITH A FRIEND OR CO-WORKER WHO HAS AIDS OR IS HIV INFECTED?

Casual, non-sexual contact found in a workplace doesn't spread the AIDS virus. AIDS is spread by risky behavior, such as unprotected sexual relations with a partner whose sexual history you don't know, or shooting drugs and sharing needles.

13. CAN MOSQUITOES OR OTHER INSECTS TRANSMIT THE VIRUS?

There is no evidence that mosquitoes or other insects transmit the AIDS virus. If they did, the virus would be widespread among children who live in places where AIDS is widespread and mosquito bites are common. It isn't.

14. CAN YOU GET AIDS FROM A BLOOD TRANSFUSION OR OTHER BLOOD PRODUCTS?

There is very little risk of contracting the AIDS virus from a blood transfusion because all donated blood and blood products are screened for signs of the virus. Unfortunately, some people were infected through blood transfusions before 1985 when blood screening began.

15. ARE PEOPLE WITH HEMOPHILIA AT INCREASED RISK FOR GETTING AIDS?

Before 1985, hemophiliacs were at a greater risk than the general population, because there was not a way to test the blood products they must receive to help their blood clot. Now these blood products are tested and treated so that the risk for hemophiliacs is very low.

16. CAN YOU BECOME INFECTED BY DONATING BLOOD?

No. Blood donation centers use only sterile needles, syringes and containers, which are thrown away after use.

17. WHERE CAN I GO TO FIND OUT IF I'M INFECTED WITH THE AIDS VIRUS?

The state of Missouri operates many sites around the state that will confidentially counsel and test for the AIDS virus. Many hospitals and private physicians also perform the AIDS virus antibody test. Information about the testing sites can be obtained by calling toll-free 1-800-533-AIDS.

18. WHAT DOES BEING TESTED FOR THE VIRUS TELL YOU?

The most commonly used test detects whether a person's blood has antibodies to the AIDS virus. If someone tests positive, it means that person has been infected with the AIDS virus and could transmit it to others.

19. WHAT ARE THE SYMPTOMS OF AIDS OR OF HIV INFECTION?

In its early stages, the AIDS virus may not have any symptoms. Even when symptoms do occur, they're very general and occur with other illnesses. Later symptoms may include night sweats, swollen glands, unexplained weight loss, a rare type of pneumonia and purplish skin discolorations. Only a physician can diagnose AIDS or other HIV-related illnesses.

20. IS THERE A VACCINE TO PREVENT AIDS?

There is no vaccine available that will protect a person from infection with the AIDS virus or from developing AIDS. Researchers are trying to develop vaccines, but these may not be available for years.

21. IS THERE A CURE FOR AIDS?

Although no cure is known, drugs have been developed to treat the infections and secondary illnesses associated with AIDS.

22. WHAT IS BEING DONE TO PREVENT THE SPREAD OF AIDS?

The best way to prevent the spread of AIDS is to teach people about how AIDS is spread, so they may avoid it. The state supports many counseling and testing sites, sponsors a statewide toll-free hotline to answer questions about AIDS and encourages education about HIV infection and AIDS. The hotline number is 1-800-533-AIDS.

23. CAN YOU BE FIRED FROM YOUR JOB BECAUSE YOU HAVE AIDS OR ARE HIV INFECTED?

People with AIDS or HIV infection have the same rights given to any other ill person in our society. For more information on this subject, please call the Missouri Commission on Human Rights at 314-751-3325.

24. CAN YOU BE KICKED OUT OF SCHOOL BECAUSE YOU HAVE AIDS OR ARE HIV INFECTED?

The Missouri Department of Elementary and Secondary Education and the Missouri Department of Health agree that a student should not be excluded from school solely because of an AIDS diagnosis or HIV infection.

25. IF SOMEONE IS DIAGNOSED WITH AIDS, WHO WILL BE TOLD?

Missouri law has strong provisions to preserve the confidentiality of people with AIDS or HIV infection. The law requires doctors and laboratories to confidentially report the name of persons with AIDS or HIV infection to the State Department of Health. Also, patients with AIDS or HIV infection must tell health care workers who care for them.

FOR ADDITIONAL INFORMATION ABOUT AIDS, CALL:

1-800-533-AIDS

or

1-800-342-AIDS

END

U.S. Dept. of Education

Office of Education
Research and
Improvement (OERI)

ERIC

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